



Patent  
Confirmation No. 9067  
Atty. Dkt. No. 042049-0107

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IFW

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants: Andre JESTIN et al.

Title: CIRCOVIRUS SEQUENCES ASSOCIATED WITH PIGLET WEIGHT LOSS DISEASE (PWD)

Appl. No.: 10/718,266

Filing Date: 11/21/2003

Examiner: Ali Reza Salimi

Art Unit: 1648

**AMENDMENT TRANSMITTAL**

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

**[ X ]** The fee required for additional claims is calculated below:

	Claims As Amended		Previously Paid For		Extra Claims Present		Rate		Additional Claims Fee
Total Claims:	20	-	20	=	0	x	\$50.00	=	\$0.00
Independent Claims:	12	-	13	=	0	x	\$200.00	=	\$0.00
First presentation of any Multiple Dependent Claims:						+	\$360.00	=	\$0.00
							CLAIMS FEE TOTAL	=	\$0.00

[ X ] Applicants hereby petition for an extension of time under 37 C.F.R. 1.136(a) for the total number of months checked below:

[ X ] Extension for response filed within the first month:	\$120.00	\$120.00
[ ] Extension for response filed within the second month:	\$450.00	\$0.00
[ ] Extension for response filed within the third month:	\$1,020.00	\$0.00
[ ] Extension for response filed within the fourth month:	\$1,590.00	\$0.00
[ ] Extension for response filed within the fifth month:	\$2,160.00	\$0.00
EXTENSION FEE TOTAL:		\$120.00
[ ] Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$130.00	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:		\$120.00
[ ] Small Entity Fees Apply (subtract ½ of above):		\$0.00
TOTAL FEE:		\$120.00

A credit card payment form in the amount of \$120.00 is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.


If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. § 1.136 and authorizes payment of any such extensions fees to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 05-23-2006

FOLEY & LARDNER LLP  
Customer Number: 22428  
Telephone: (202) 672-5569  
Facsimile: (202) 672-5399

By  (45,943)  
SEAN A. PASSINO FOR  
Stephen B. Maebius  
Attorney for Applicants  
Registration No. 35,264